- 1													
	PATENT APPLICATION FEE DETERMINATION RECORD Effective December 8, 2004								Application or Docket Number				
		CLAIMS AS FILED - PART I								7000			
, m 1 mm			(Column			(Column 2)		SMALL EN	my ′	OR	OTHER THAN SMALL ENTITY		
.U.	S. NATIONAL	STAGE FEES]	RATE	FEE	7	RATE	FEE	
ВА	ASIC FEE		SMALL ENT.	. = \$ 150	LAR	RGE ENT. = \$ 300	1	BASIC FEE	150	OR	BASIC FEE	+	
EX	CAMINATION FE	EE	Satisfies PCT Ar (4) = \$50		1	other situations = \$ 100 / \$ 200	1	EXAM. FEE	100	1	EXAM. FEE	-	
SE	ARCH FEE		U.S. is ISA = \$ ALL other cou \$ 200 / \$	\$ 50 / \$ 100 untries =	Allo	other situations = \$ 250 / \$ 500	1	SEARCH FEE	200	1	SEARCH FEE	 	
FE	E FOR EXTRA	SPEC. PGS.	min	minus 100 =		/ 50 =	1	X \$ 125 =		1	X \$ 250 =	 	
то	TAL CHARGEA	BLE CLAIMS	/4 min	inus 20 =	•			X \$ 25 =		OR	X \$ 50 =	-	
INC	DEPENDENT CL	LAIMS	/ m	ninus 3 =			1	X \$ 100 =		OR	X \$ 200 =	 	
MU	LTIPLE DEPEN	NDENT CLAIM PRE	ESENT	***************************************				+\$ 180 =		OR	+ \$ 360 =	†	
* If the difference in column 1 is less than zero, enter "()" in co	olumn 2		TOTAL	150	OR	TOTAL	 	
		O' 41310 40			_		•			•			
		CLAIMS AS	AMENDED							_	OTHER		
 		(Column 1)		(Colum		(Column 3)	- 6	SMALL E	NTITY	OR	SMALL	ENTITY	
ENTA		REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	•	Minus	**		=		X \$ 25 =		OR	X \$ 50 =	 	
AME	Independent	*	Minus	***		=		X \$ 100 =		OR	X \$ 200 =		
	FIRST PRES	SENTATION OF MI	ULTIPLE DEPE	NDENT C	CLAIM			+ \$ 180 =	-	OR	+ \$ 360 =		
		i i	TOTAL ADDIT.		OR	TOTAL ADDIT.							
								rec L		1	FEE	<u> </u>	
		(Column 1)		(Colum		(Column 3)	. 6=			_			
ENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBI PREVIOL PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	•	Minus	**		=		X \$ 25 =		OR	X \$ 50 =		
AME	Independent		Minus	***		=		X \$ 100 =		OR	X \$ 200 =		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT C				LAIM			+ \$ 180 =		OR	+ \$ 360 =		
	TOTAL ADDIT.										TOTAL ADDIT. FEE		
											,	 	
	**** * ** ** **			•									
i	if the "Highest Nur	imn 1 is less than the e imber Previously Paid	For IN THIS SPA	ACF is loss t	than '20'	Y enter "20"							
'	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '20', enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												